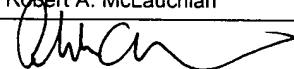


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Approved for use through 09/30/00. OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>		Attorney Docket No. 13754:11	
		First Named Inventor or Application Identifier Dennis P. Schwartz	
		Title System and Method for Generating Residential Loan Documents from Multiple and Diverse Databases	
		Express Mail Label No. EU 867 634 608 US	
APPLICATION ELEMENTS <i>See MPEP Chapter 600 concerning utility patent application contents</i>		ADDRESS TO: Mail Stop: Patent Applications Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450	
1. <input type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification <i>[Total Pages]</i> <i>(preferred arrangement set forth below)</i> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) Abstract of the Disclosure		8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies.	
4. <input checked="" type="checkbox"/> Formal Drawings <i>[Total Sheets]</i> 5. <input checked="" type="checkbox"/> Oath or Declaration <i>[Total Pages]</i> 2 <i>(including Supplemental Declaration)</i> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR §1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application. See 37 CFR §1.63(d)(2) and 1.33(b)/		9. <input type="checkbox"/> Assignment Papers (cover sheet & Documents(s)) 10. <input type="checkbox"/> 37 CFR §3.73(b) Statement <i>(when there is an assignee)</i> <input type="checkbox"/> Power of Attorney 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/ PTO-Form 1449 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Nonpublication Request under 35 USC 122(b)(2)(b)(i). Applicant must attach Form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other: _____	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)			
18. If a CONTINUING APPLICATION , check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____ Prior application information: Examiner: _____ Group / Art Unit: _____			
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
19. CORRESPONDENCE ADDRESS <input type="checkbox"/> Customer Number or Bar Code Label <i>(Insert Customer No. or Attach bar code label here)</i> or <input type="checkbox"/> Correspondence address below			
NAME	Hughes & Luce, LLP		
ADDRESS	1701 Main Street, Suite 2800		
CITY	Dallas	STATE	Texas
COUNTRY	U.S.A.	TELEPHONE	512-482-6800
Name (Print/Type)	Robert A. McLauchlan		Registration No. (Attorney/Agent) 44,924
Signature			Date July 8, 2003



07/08/03

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**FEE TRANSMITTAL FOR
FY 2003**

Patent Fees are subject to annual revision.

Applicant claims small entity status.
See 37 CFR 1.27**Total Amount of Payment** **\$ 438.00****Application Number**

Not yet assigned

Filing Date

Filed concurrently herewith

First Named Inventor

Dennis P. Schwartz, et al.

Examiner Name

Unknown

Group / Art Unit

Unknown

Attorney Docket No.

13754:11

METHOD OF PAYMENT (check all that apply)
 Check Credit Card Money Order Other None
Deposit Account:

Deposit Account No.: 50-1343

Deposit Account Name: Hughes & Luce, LLP

The Commissioner is authorized to: (check all that apply)

Charge any fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below (except for the filing date) to the above identified deposit account.

FEE CALCULATION**1. Basic Filing Fee**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1001	750	2001	375
1006	750	2006	375
1002	330	2002	165
1004	740	2004	370
1005	160	2005	80
Subtotal (1)			\$ 375.00

2. Extra Claim Fees

Claims	Extra	Fee (below)	Fee Paid
Total	27 - 20** =	5 x \$ 9.00	= \$ 63.00
Indep.	3 - 3** =	1 x \$42.00	= \$
Multiple Dependent			\$ 63.00

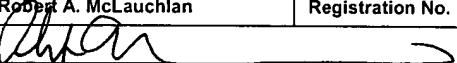
Large Entity		Small Entity	
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1202	18	2202	9
1201	84	2201	42
1203	280	2203	140
1204	84	2204	42
1205	18	2205	9
Subtotal (2)		\$ 63.00	

**or number previously paid, if greater. For Reissues, see below

FEE CALCULATION (continued)**3. Additional Fees**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1804	920*	1804	920*
1805	1840*	1805	1840*
1251	110	2251	55
1252	410	2252	205
1253	930	2253	465
1254	1,450	2254	725
1255	1,970	2255	985
1401	320	2401	160
1402	320	2402	160
1403	280	2403	140
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,300	2453	650
1501	1,300	2501	650
1502	470	2502	235
1460	130	1460	130
1814	110	2814	55
1806	180	1806	180
8621	40	8621	40
1809	750	2809	375
1801	750	2801	375
1802	900	1802	900
Other fee (specify):			\$
* Reduced by Basic Filing Fee Paid			
Subtotal (3)			\$

SUBMITTED BY**Complete (if applicable)**

Name (Print/Type)	Robert A. McLaughlan	Registration No.	44,924	Telephone	512-482-6800
Signature				Date	